PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2003									Application or Docket Number 10 735 150 38278,3.2.					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	. EN	πιτ γ	OR	OTHER		
TOTAL CLAIMS			39					RATI	E	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUME	MBER EXTRA		BASIC I	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			39 - minus 20=		•19			X\$ 9	=	171.0	OR	X\$18=		
INDEPENDENT CLAIMS			チ_ minus 3 =					X43= 43.0		•	1 1	X86=		
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT						+145=		1	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							-	TOTA	-4	639.0	OR	TOTAL	· ·	
CLAIMS AS AMENDED - PART II									L	<u>657.0</u>	Dou	OTHER	THAN	
_\	(Column 2) (Column 3)							SMAL	L E	NTITY	OR	SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N N	Total	.40	Minus	# 2	9	=]	2	,	35	OR	1969		
AME	Independent	. 6	Minus	***	4	= 2]	TO F		200	OR	080		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=			OR	+290=		
									AL	864		TOTAL		
(Column 1) (Column 2) (Column 3)									EE L	001	J • · · ·	ADDIT. FEE		
6	CLAIMS REMAINING			HIGH	ST		ו ר			ADDI-) [ADDI-	
ENT		AFTER AMENDMENT		PREVIO	USLY	PRESENT		RATE	: ¹	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT B	Total	*	Minus	L	60	=] [X\$ 9=			OR	X\$18=		
4ME	Ind p ndent	•	Minus	***	6	=] [X43=	1		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1			+290=		
								+145=			OR	TOTAL		
								ODIT. FE		. —	OR ,	ADDIT. FEE		
	`	(Column 1)		(Colum		(Column 3)) 							
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	•	Minus	44		=	Ţ	X\$ 9=			OR	X\$18=		
WE.	Independent		Minus	. ***		= .		X43=	十			X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											OR			
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR ,	TOTAL ODIT. FEE		
·T	he "Highest Num	ber Previously Paid	For (Total or	Independe	nt) is the	highest numb	er four	nd in the	appro	opriate box	in colu	.mn 1.		